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P.O. Box 1450  
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on NOVEMBER 24, 2003

*Milton L. Honig* 11/24/03  
MILTON L. HONIG Date of  
Reg. No. 28,617 Signature  
Attorney for Applicant(s)

J6691/1(C)  
Y2-0530-A-HC

PATENT

RECEIVED  
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TC 1700

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Customer Number: 000201  
Attorney Docket No.: J6691/1(C)  
Applicant: Patel et al.  
Serial No.: 10/090,715  
Filed: March 5, 2002  
FOR: METHOD AND COMPOSITION FOR THE GRADUAL  
PERMANENT COLORING OF HAIR  
UNUS No.: Y2-0530-A-HC

Group: 1751  
Examiner: Eisa B. Elhilo

Edgewater, New Jersey 07020  
November 24, 2003

AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated October 28, 2003, please amend the above-  
identified patent application as follows.

**Amendments to the Specification** begin on page 3 of this paper.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 5 of this paper.

**Remarks/Arguments** begin on page 12 of this paper.



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Reg. No. 28,617

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an **AMENDMENT** in the above-identified application.  
[X] No additional fee is required.

The fee has been calculated as shown below.

**CLAIMS AS AMENDED**

|   | (2) * Claims<br>Remaining After<br>Amendment |       | (4) ** Highest No.<br>Previously Paid For | (5) Present<br>Extra | (6) Rate  | (7) Additional Fee |
|---|--|-------|---|----------------------|-----------|--------------------|
| Total Claims                            |  | Minus |   |                      | \$ 18.00  |                    |
| Independent Claims                      |  | Minus |   |                      | \$ 84.00  |                    |
| Multiple Claims                         |  |       |   |                      | \$ 280.00 |                    |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT |  |       |   |                      | \$        |                    |

\*If the entry in Column (2) is less than the entry in Column (4), write "0" in Column (5).

\*\*If the "Highest No. Previously Paid For" is less than "20," write "20" in this space.

- [ ] Charge \$\_\_\_\_\_ to Deposit Acct. #12-1155. Triplicate copies of this letter are enclosed.  
[X] The Commissioner is hereby authorized to charge any additional fees, which may be required to our deposit account No. 12-1155, including all required fees under  
[X] 37 C.F.R. § 1.16;  
[X] 37 C.F.R. § 1.17;  
[X] 37 C.F.R. § 1.18.

Triplicate copies of this letter are enclosed.

MLH/sm  
(201) 840-2403

*Milton L. Honig*  
Milton L. Honig  
Attorney of Record  
Reg. #28,617